

MEDICAID ALERT

February 14, 2013

MLTC Submissions of Nursing Home Enrollments

Managed Long Term Care (MLTC) enrollments for consumers being discharged from a Nursing Home must be sent to Home Care (HCSP) for manual processing. The Nursing Home Medicaid case must be converted to community based coverage before the case can be enrolled into Managed Long Term Care. Manual processing allows HCSP to ensure this process is properly coordinated.

In order to facilitate these enrollments as fully as possible, MLTC enrollments for consumers being discharged from a Nursing Home can be submitted to HCSP up until the last day of the month prior to the enrollment month. MLTC plans should be aware, however, that these enrollments require 2 or more business days to process. Therefore enrollments submitted on the last day of the month will not appear in E-PACEs on the first day of the month. Unfortunately, HCSP cannot enroll a consumer into a MLTC plan for a month if the consumer has spent at least one day of that month in a nursing home as that would create duplicate payments to the Nursing Home and the MLTC plan.

MLTC enrollments for consumers being discharged from a Nursing Home must include:

- HCSP-3022
- A copy of the completed Nursing Home discharge Alert (MAP-259D)
- A copy of the signed enrollment form
- A copy of the MAP-3057 (Special Income Standard) form, if applicable (see below)

Special Income Standard for Housing Expense for Individuals Discharged from a Nursing Facility and who Enroll into the MLTC Program

Effective October 15, 2012, individuals who can be safely discharged back to the community from a nursing facility and who enroll into the Managed Long Term Care (MLTC) program will have their Medicaid eligibility determined under a special income standard if the recipient has a housing expense. This special income standard is available the first day of the month enrollment into the MLTC program becomes effective.

To be eligible for the special income standard for housing expenses, an individual must:

- Be approved for participation in and enrolled in a MLTC plan
- Have been in the nursing home for at least 30 days (not including the date of discharge)
- Have made a Medicaid payment toward the cost of the individual's care in the nursing home
- Have a housing expense

Individuals who are subject to spousal impoverishment budgeting in the community are excluded from receiving the special income standard. This means that a married individual who participates in the Program of All Inclusive Care for the Elderly (PACE) program is not eligible for the special income standard as they are considered to be an institutionalized spouse for spousal impoverishment budgeting purposes.

The special income amount varies by New York State region. The amount for New York City is \$1042 regardless of the recipient's actual housing expense. The special income standard is used for determining the former nursing home resident's eligibility for Medicaid. It is not used for determining eligibility for the Medicare Savings Program.

Since a consumer must be approved for participation in and enrolled in a MLTC plan to qualify for the special income standard, MLTC plans need to notify HRA of a recipient's potential eligibility for the special income standard. A new form, MAP-3057, has been developed for completion by consumers to attest to information necessary to determine their eligibility for the new standard.

If an individual is receiving the special income standard and disenrolls from MLTC, the special income standard ceases to apply the first day of the month following the month of disenrollment.

Further information is available in 12 HIP/ADM-5, Special Income Standard for Housing Expenses for Individuals Discharged from a Nursing Facility who Enroll into the Managed Long Term Care (MLTC) Program.

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